2021 Keystone Open Pre-Squadding Form

Enter information for each shooter on the position line that he/she will shoot						Friday 5/14			Saturday 5/15		Sunday 5/16	
Post	ATA#	NAME - CL	NAME - CLS / CAT		Singles	Handicap	Doubles	Singles	Doubles	Doubles	Handicap	
1					E M L	EML	EML	EML	EML	EML	E M L	
2					E M L	EML	EML	EML	EML	EML	E M L	
3					E M L	EML	EML	EML	EML	EML	EML	
4					E M L	EML	EML	EML	EML	E M L	E M L	
5					E M L	EML	EML	EML	EML	E M L	E M L	
	Which do yo	ne):	<u> </u>	Circle Time Request in each event.								
TIME or BANK					(E)arly(M)iddle(L)ate							
Enter Bank # Request (four to five*):////					* Please list four (4) to five (5) bank choices. Every effort will be made to meet your request.							
	Enter information for person sub	Place an "X" in the box representing the event(s) each shooter wishes to be squadded for. If you wish to squad for all events, you may write the word "ALL" on the line for each applicable shooter.										
NAME: ATA#			 Applications that do not have each shooter's information completely and properly filled out will be rejected. Do Not Forget to include each shooters yardage. 									
Address			A second form is required if your shooters wish to shoot a different post for handicap or doubles or if you will have different shooters shooting any posts for subsequent events.									
City, State ZI	P		II .									
			Please Note: Pleas		•					•	ng less	
Phone #			than full squaus-	–орионагрс	ists, ruii sqt	Jaus With ui	Herent yan	uage-optio	nai posts, e	:tc).		
		In an effort to avoid unused positions, it is imperative that you cashier or release pre-squadded										

Special Instructions:

event may be released by management.

Chair Shooter

Yes

positions prior to the event. Pre-Squadded positions that are not cashiered or released prior to the